



PROVIDER QUICK TIPS

#67

Prior Authorization Requirements for Elective Non-Fee Schedule Surgical Procedures Effective August 1, 2008

Important note –

this requirement does not apply to HealthChoices of Voluntary Managed Care

Effective August 1, 2008, a MA-97 form submitted as a Program Exception/1150 Waiver is required for prior authorization of all non-fee schedule surgical procedures to be performed in the following settings:

- ✓ **Inpatient**
- ✓ **Short Procedure unit of ambulatory surgical center**
- ✓ **Physician office or clinic setting**

To expedite the request, please include the following required information on the MA-97

- Pertinent medical documentation to include, but not limited to: history & physical, office/clinic notes, test results & operative report if applicable
- Information regarding additional surgical procedures to be done in conjunction with primary procedure
- Date of service
- Place of service
- Level of sedation
- 13-digit Provider Identification number for both the physician/surgeon & facility
- Contact information for the provider submitting the request

It is the responsibility of the provider to review the Medical Assistance Program Fee Schedule to determine if there is a valid/comparable procedure code on the Fee Schedule. If an appropriate code exists, a Program Exception is not needed; however, you must call 1 (800) 558-4777 and follow the appropriate process. If no code(s) exists, you must provide medical documentation to justify the need for using any surgical procedure(s) not on the Fee Schedule.

It is very important for you to understand that obtaining a Prior Authorization is not a guarantee of payment. Claims may deny for other reasons such as Error Status Code (ESC) 2003 – RECIPIENT INELIGIBLE ON DATE(S) OF SERVICE. If you have any questions regarding MA-97 requests, please call the Provider Hotline at 1(800) 537-8862.

For additional information, go to the **PROMISE™** Web site at <http://promise.dpw.state.pa.us>.
Check the Department of Human Services' Web site often at: www.dhs.pa.gov

**Thank you for your service to our Medical Assistance recipients.
We value your participation.**

